

- Benefit for pregnant women: Probiotics significantly **reduce frequency of flatulence and constipation** in the last months of pregnancy.
- Benefit for newborns and infants: Specific intestinal synbiotics for the **preventive treatment of 3 month colic**.
- Probiotic bacteria significantly **reduce diseases of the allergic spectrum** – confirmed multiple times in clinical studies.

## Study results on multi-species synbiotics

# Probiotics for indigestion in pregnancy and infant colic

Indication-specific bacterial cultures reduce the rates of allergic diseases as confirmed repeatedly in various clinical studies: Probiotics provide significant protection against atopic dermatitis, where the results are achieved when the intestinal synbiotics are administered pre- and postnatally (Panduru, 2015). The multi-species synbiotic Omni Biotic® Panda was developed to treat allergic diathesis in high-risk children. A double-blind, placebo-controlled, randomized study with 156 infants showed a significant effect on the incidence of atopic dermatitis (Niers, 2009). The responsible mechanism of action is the regulation of the immunological TH1 and TH2 balance by specific bacterial cultures.

## Study design: familial predisposition frequently present

To generate additional scientific findings on this synbiotic, a clinical investigation was conducted at the Department of Gynaecology and Obstetrics at the Sta-

te Hospital of Feldbach-Fürstenfeld from June 2012 to August 2015 under the direction of Prim. Univ.-Doz. Dr. Hannes Hofmann. In this study, Omni Biotic® Panda was made available to 148 pregnant women and their infants over a period of 6 months. The participating mothers filled out a questionnaire during the last 2 months of pregnancy and the first 4 months of life of the newborn on a daily basis. The following primary endpoints of the study were defined:

1. Pregnant women: Impact of probiotics on the incidence of constipation and flatulence during the last two months of pregnancy
2. Infants: Occurrence of 3-month colic

In this sample, 61.9% of infants were genetically predisposed to allergic diseases in at least one expression. For indigestion, the prevalence indicated by the pregnant women was 57.7%; especially frequent was a predisposition to 3-month colic (36.7%), recurrent diarrhoea (13.5%), (chronic) constipation (10.4%), and irritable bowel syndrome (8%).

In diseases of the allergic spectrum, familial predisposition increases the risk of the



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newborn developing atopic disorders by up to 35% if a sibling is already affected, and up to 40% if a parent suffers from such complaints. Multiple occurrences within the family results in a risk of up to 80% (Borowski, 2005). The infants investigated in the study had familial predispositions of allergic rhinitis (45.9%), eczema (44.1%), food allergies (30.1%), rhinitis (28.3%), and asthma (16%).

The probability of 3-month colic is generally about 30% (Stählberg, 1984), and genetic predisposition increases this. Furthermore, the mode of birth affects this risk (Dominguez-Bello et al., 2010). In this study, 35.9% of the children were born by Caesarean section. This value lies above the Austrian average of 28.8% (Macfarlane et al., 2015).

## Study results: Intestinal synbiotics show great effect

**Pregnancy:** Women suffer from constipation at the end of pregnancy in up to 40% of cases (Marshall et al., 2010). According to the definition of less than 3 bowel movements per week (Hasenöhr, 2014), only 2.4% of the women studied in this investigation had constipation at the end of the pregnancy. This value lies significantly below the accepted reference value (40%); it shows a significant improvement in constipation symptoms over time.

Flatulence likewise occurs in up to 40% of women at the end of a pregnancy (Rath, 2010). In this indication as well, the percentage of women with flatulence decreased significantly over time in this study. Shortly before the birth of the child, only 5.28% of the investigated pregnant women suffered from flatulence.

**Newborns:** Significant correlations between the frequency of flatulence, cry duration, and diarrhoea were shown in the investigation. These three variables are accepted here as indicators for 3-month colic. In the centre, cry duration was measured in minutes per day. Excessive crying was defined by at least 3 times

per week and more than 180 minutes per day. Figure 1 shows the time sequence of the mean cry duration of the investigated infants. This decreases significantly in the course of time. During the administration of Omni Biotic® Panda, the infants did not achieve the typical cry duration for colic of 180 minutes per day.

Only 4.90% of the investigated children showed the characteristics of excessive crying (3-month colic) (see Fig. 2), while the general rate of prevalence is up to 30% (Stählberg, 1984).

Children who have a predisposition to disorders of the digestive system or colic showed no statistically significant higher probability for excessive crying or colic in this investigation.

In a previous evaluation of Omni Biotic® Panda in acute gastrointestinal colic (Institut Allergosan, 2014, n = 66), taking the probiotic already resulted in an improvement of complaints in 43.9% of the babies within the first 5 days, and in 82.5% within 3 weeks; 91% of the mothers assessed the effect as good or very good.

**CONCLUSION:** The current study clearly shows that specially developed multi-species probiotics provide relief to expectant mothers from flatulence and

constipation during pregnancy and for infants in 3-month colic and digestive disorders (diarrhoea, flatulence). ■

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Fig. 1: Cry duration of newborns in the context of taking probiotics

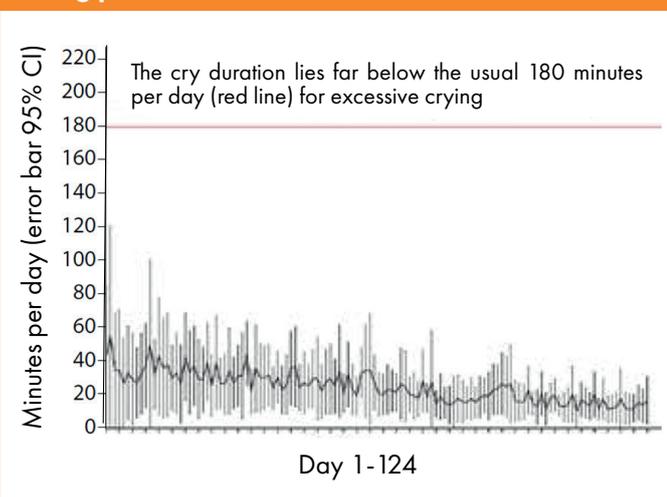


Fig. 2: Reduction of the occurrence of early childhood colic by the probiotic

